Effective on 12/08/2004.								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Application Number 10/576,701				
For FY 2009				g Date	10/19/2004			
FOI F 1 2009				First Named Inventor Catharina Philippina Jansse			en	
Applicant claims small entity status. See 37 CFR 1.27				niner Name	Thane E. Underdahl			
				Art Unit 1651				
TOTAL AMOUNT OF PAYMENT (\$) 130,00				Attorney Docket 0702 - 061238			***	
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038,								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type	Small En		nall Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fear F	Paid (\$)	
Utility	330 82	540	270	220	110	resi	aid (#)	
Design	220 110	100	50	140	70			
Plant	220 110	330	165	170	85	-		
Reissue	330 165	540	270	650	325			
Provisional	220 110		0	0			<del></del>	
A DVCDOC OV A D C DDOC								
Fee Description Fee (\$)							Small Entity Fee (\$)	
Each claim over 20 (including Reissues) 52							26	
Each independent claim over 3 (including Reissues)							110	
Multiple dependent clai			390	195				
Total Claims - 20 or HP Extra Claims Fee (S			e (\$)	S) Fee Paid (\$) Multiple			ependent Claims	
	34 =		<u>)                                    </u>	0		Fee (\$)	Fee Paid (\$)	
HP = highest number of t	otal claims paid for, if	greater than 20.						
Indep. Claims - 3	or HP Ext	ra Claims Fe	e (\$)	Fee Paid (\$)				
7	7 =		) =	0				
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Extension of time (one month)							130.00	
SUBMITTED BY								
	AM	0		egistration No.	40.01.1	Televis	10 451 0017	
Signature	110	ep-	(/	Attorney/Agent)	43,016	Telephone 4	12-471-8815	
Name (Print/Type)	Nathan J. Prep	elka				Date June	e 11, 2010	